

WD 1

IN THE UNITED STATES DISTRICT COURT FOR  
THE MIDDLE DISTRICT OF ALABAMACARL MELTON, SRFull name and prison name of  
Plaintiff(s)

2001 DEC 20 A 9:01

v.

Capt. Larry NixonWARDEN AtchinsonNURSE PaulaGo F. KnightSheriff Herbie JohnsonName of person(s) who violated your  
constitutional rights. (List the names  
of all the person.)) (FBR) P. HAGAN  
) U.S. DISTRICT COURT  
) MIDDLE DISTRICT OF ALABAMACIVIL ACTION NO. 2:07CV1105-WKW  
(To be supplied by Clerk of U.S. District

## I. PREVIOUS LAWSUITS

A. Have you begun other lawsuits in state or federal court dealing with the same or similar facts involved in this action? YES  No

B. Have you begun other lawsuits in state or federal court relating to your imprisonment? YES  NO

C. If your answer to A or B is yes, describe each lawsuit in the space below. (If there is more than one lawsuit, describe the additional lawsuits on another piece of paper, using the same outline.)

## 1. Parties to this previous lawsuit:

Plaintiff(s) \_\_\_\_\_

Defendant(s) \_\_\_\_\_

## 2. Court (if federal court, name the district; if state court, name the county)

\_\_\_\_\_

3. Docket number \_\_\_\_\_
4. Name of judge to whom case was assigned \_\_\_\_\_
5. Disposition (for example: was the case dismissed? Was it appealed? Is it still pending ?) \_\_\_\_\_
6. Approximate date of filing lawsuit \_\_\_\_\_
7. Approximate date of disposition \_\_\_\_\_

II. PLACE OF PRESENT CONFINEMENT Autauga County JAIL

PLACE OR INSTITUTION WHERE INCIDENT OCCURRED Autauga  
County JAIL

III. NAME AND ADDRESS OF INDIVIDUAL(S) YOU ALLEGE VIOLATED YOUR CONSTITUTIONAL RIGHTS.

|    | NAME  | ADDRESS                    |
|----|---|----------------------------|
| 1. | <u>SHERIFF HERBIE Johnson - Sheriff Dept.</u> |                            |
| 2. | <u>Larry NIXON</u>                            | <u>136, N COURT, ST</u>    |
| 3. | <u>WARDEN Acthinson</u>                       | <u>PRATTVILLE AL 36067</u> |
| 4. | <u>NURSE Paula</u>                            | <u>11</u>                  |
| 5. | <u>Yo R. Knight</u>                           |                            |
| 6. |   |                            |

IV. THE DATE UPON WHICH SAID VIOLATION OCCURRED NOVEMBER 17<sup>th</sup>  
2007, through December 2007,

V. STATE BRIEFLY THE GROUNDS ON WHICH YOU BASE YOUR ALLEGATION THAT YOUR CONSTITUTIONAL RIGHTS ARE BEING VIOLATED:

GROUND ONE: The Doctor Change my Medicine without every seeing me / My Medical chart has a listing of my Medical condition, My wife brought my Medicine I Regularly take and it was change

STATE BRIEFLY THE FACTS WHICH SUPPORT THIS GROUND. (State as best you can the time, place and manner and person involved.)

Nurse Paula Constantly denies Me Medical Treatment the Nurse STAFF gives Me my Medicine at the wrong time sometimes they withhold and skip days on my Medicine. They give me pills I've never seen before  
I was force to sleep on the floor with my Heart and breathing <sup>condition</sup>  
GROUND TWO: UN Clean EATING Utensils and the serving

Sometimes <sup>→</sup> of the Sandwiches DAILY UN SANITARY, The Lunch  
Peanut Butter Sandwich Menu Daily, Consist of two "MayoNaise Sandwiches" that's <sup>All</sup>  
SUPPORTING FACTS: They Never EVER wash your Eating

utensils Jail Staff, Trustee's, Trustee uses  
the same gloves to serve the Entire jail  
Population Daily touching the cart, DOORS, walls  
other inmates hands, Sandwiches are in (1) or (2)  
big plastic Bins for Entire population un wrap in a big pile

GROUND THREE: clothes are change every (9) to (10) days

force to wear stinking, Musky clothes or get  
lock down in your cell will not feed you unless you wear <sup>clothes</sup>

SUPPORTING FACTS: Go Knight change's out the Federal  
INMATES clothes on time and skip the County INMATES  
Constantly since I've been here NOVember 17th 2007  
to present time Denied, RASOR for Shaving every  
2 weeks

UNbalance diet, NO FRUITS, Federal InMates are held here  
under these conditions

GROUND TWO: You Can Read the Newspaper through  
the turkey meat it just that thin (1) slice per sandwich

SUPPORTING FACTS: The feed you only two  
Mayo naise Sandwiches daily and sometimes  
Peanut butter and bologna sandwiches and  
nothing to drink with no Meals Except on  
Sunday's you get some old tea that's it

GROUND THREE: \_\_\_\_\_

SUPPORTING FACTS: Exhibits ATTACHED "A", "B", "C", "D", "E  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

VI. STATE BRIEFLY EXACTLY WHAT YOU WANT THE COURT TO DO FOR YOU. MAKE  
NO LEGAL ARGUMENT. CITE NO CASES OR STATUTES.

Cruel + un just Treat. Ment D AMages \$ 200,000  
I want punitive DAMAGES of \$ 200,000 Dollars

Negligence DAMAGES of \$ 100,000 Dollars

Carl Meltton  
Signature of plaintiff(s)

I declare under penalty of perjury that the foregoing is true and correct.

EXECUTED on 12-16-2007  
(date)

Carl Meltton  
Signature of plaintiff(s)

Check one:  Dental  Medical  Mental HealthName: Carl Melton Inmate I.D. Number 77501

Social Security No. \_\_\_\_\_

Housing Unit 7-DORM-pod dayRoomMedical Problem (be specific): I have Repeatedly ask FOR Medical Attention, for My Heart Condition and Breathing problem and have been denied Repeatedly The Sharp pains in my chest are severe and constantInmate's Signature: Carl Melton Date 11/20/2007 Time 10:00 AM

FOR MEDICAL UNIT USE ONLY

S: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_O: T \_\_\_\_\_ P \_\_\_\_\_ RR \_\_\_\_\_ BP \_\_\_\_\_ WT \_\_\_\_\_ Pulse Ox \_\_\_\_\_ %  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_A: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_P: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_E: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_Disposition: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_Nursing Protocol: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Provider's Signature: \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_

Referred to Physician  Appointment Date \_\_\_\_\_ Time \_\_\_\_\_

TO: SHERIFF HERBIE Johnson DATE: 12 - 3 - 2007

BRIEFLY STATE THE PROBLEM YOU NEED ASSISTANCE WITH:

NOTE: If you follow instructions in preparing your request, it can be handled in a timely manner.  
Failure to specifically state your request may result in no action being taken.

COPY

## GRIEVANCE FORM

I Want to Know why you don't Respond back to Any of My Grievance Form's About the way we get Fed Lunch. Its not done correctly its unclean one man goes to all of the cell pods and use's the same gloves to serve the sandwiches touching the push cart and walls, nose, just everything its unsanitary you can get sick this trustee is passing Germs to every body's Food

INMATE NAME: Carl Melton

POD ASSIGNMENT: 7 pod dayroom

\*\*\*\*\* DO NOT WRITE IN THIS SPACE \*\*\*\*\*

DISPOSITION:

OFFICER'S SIGNATURE

DATE

TO: Captain NIXON

DATE: 12-3-2007

BRIEFLY STATE THE PROBLEM YOU NEED ASSISTANCE WITH:

NOTE: If you follow instructions in preparing your request, it can be handled in a timely manner.  
Failure to specifically state your request may result in no action being taken.

COPY

## GRIEVANCE FORMS

I am being Denied the Proper Medical Treatment  
not given my Medicine at the prescribe time  
I can't get my blood pressure taken I have to  
Sleep on the floor I can't get my spoon wash or  
my cup Yo Knight does not give us FRESH clothes  
but every 10 days or more. I'M tired of this  
mess I've sent you over (10) ten Grievance Forms  
Already you arn't done nothing yet

INMATE NAME: Call Me effton ID NO. #77501

POD ASSIGNMENT: 7-pod day room

\*\*\*\*\* DO NOT WRITE IN THIS SPACE \*\*\*\*\*

DISPOSITION:

FICER'S SIGNATURE

DATE

TO: SHERIFF HERBIE Johnson DATE: 12-3-2007

BRIEFLY STATE THE PROBLEM YOU NEED ASSISTANCE WITH:

NOTE: If you follow instructions in preparing your request, it can be handled in a timely manner.  
Failure to specifically state your request may result in no action being taken.

COPY

## GRIEVANCE FORM

I AM being Denied the proper Medical treatment For my condition, I am being given Medicine I've never Seen before and not given at the prescribe time, they won't even check my blood pressure. Nurse Paula Gets smart with me and won't listen nor DO anything for me

I have to sleep on the FLOOR, I've Sent over (9) nine GRIevance Forms to Captain Nixon, they don't wash or clean our spoons or cups we wear dirty clothes for over a week

Carl Mefton ID NO# 77501

INMATE NAME:

POD ASSIGNMENT: 7-pod day room

\*\*\*\*\* DO NOT WRITE IN THIS SPACE \*\*\*\*\*

DISPOSITION:

FICER'S SIGNATURE

DATE

I am a witness to the fact that the Autauga Jail staff does not supply you with clean clothes, and wash your spoons and FORKS and SERVE the lunch sandwiches in a unsanitary ~~area~~ manner never changing gloves and unbalance diet and treated MR Carl Melton wrong in his Medical treatment at the Autauga jail by the Nurse staff.

|                    |                 |
|--------------------|-----------------|
| 1 Brandon Ward     | Brandon Ward    |
| 2 Rondrick Mosley  | Rondrick Mosley |
| 3 Larry A. Wells   | Larry A. Wells  |
| 4 Charlie Wilson   | Charlie Wilson  |
| 5 Kevin Austin     | Kevin Austin    |
| 6. James Willis    | James Willis    |
| 7. Billy Singleton | Billy Singleton |

12-16-2007

To: Honorable clerk, MRS Debra Hackett *Debra Hackett*  
U.S. DISTRICT COURT  
MIDDLE DISTRICT ALA

from: Carl Melton,

2007 DEC 20 A 9:38

re: use my home, as the Return address  
to this Instant Complaint.

Change of Address

MR. CARL Melton SR  
178 County RD 40 West  
Prattville, AL 36067-3002

Mail to the Above Address  
the Court Response to this  
Instant Complaint

Thank you very much

Carl Melton SR

I should be out before you make a  
judgement on this instant complaint so  
I'm requesting that you send to my home address  
above.